

## Parent Survey

Please complete the survey  
and return it to your child's teacher.

1. What is the grade of the child who brought home this survey?
2. Is the child who brought home this survey male or female?
3. How many of your children attend this school?
4. How many children do you have in kindergarten through 8<sup>th</sup> grade?
5. Address your child commutes from:
  
6. **On most days**, how does your child commute to school? (select only one)  
Walk                      Bike                      Car pool (with children from other families)  
School bus              City bus                      Family vehicle (only your children)  
Other (skateboard, scooter, inline skates, etc.)
  
7. How long does it **usually** take your child to commute to school?  
Less than 5 min              5 – 10 min              11 – 20 min              More than 20 min
  
8. **On most days**, how does your child commute from school? (select only one)  
Walk                      Bike                      Car pool (with children from other families)  
School bus              City bus                      Family vehicle (only your children)  
Other (skateboard, scooter, inline skates, etc.)
  
9. How long does it **usually** take your child to commute from school?  
Less than 5 min              5 – 10 min              11 – 20 min              More than 20 min
  
10. Has your child ever asked for permission to walk or bike to/from school in the past year?  
Yes                      No
  
11. At what grade would you allow your child to walk or bike to/from school:  
a) with an adult in your family? grade:  
b) with friends the same age and no adult? grade:  
c) with 6<sup>th</sup> grade students who live in your neighborhood and no adult? grade:  
d) with another parent who lives in your neighborhood? grade:  
e) alone? grade:
  
12. How often does your child walk and/or bike to school?  
Never                      Once or more a week                      Once or twice a month  
Once or a few times a year                      Once every few years



13. Select the factors that would allow your child to walk or bike to/from school more often? (Select ALL that apply)

Driving becomes less convenient	Shorter crossings (narrower roads)
More time in the morning/afternoon	Presence of crossing guard
Shorter distance	Less violence or crime
Lower speed of traffic along route	Less homeless along route
Less traffic along route	Having adult to walk/bike with
Better drivers	Having other students to walk/bike with
Longer walk signal for pedestrians	Child's before or after-school activities
Better weather / Less rain / Cooler	Knowing how to bike / owning a bike
Better sidewalks or pathways	None
Less roads to cross	Other:

14. In your opinion, does your child's school encourage or discourage walking and biking to/from school?

Strongly encourages	Encourages	Neither
Discourages	Strongly discourages	

15. How much fun do you think walking or biking to/from school is for your child?

Very fun	Fun	Neither	Boring	Very boring
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16. What could be done to make walking/biking more fun for your child?

17. How healthy is walking or biking to/from school for your child?

Very healthy	Healthy	Neutral
Unhealthy	Very unhealthy	

18. Please provide your email address if you are interested in learning about opportunities to participate in the school's Safe Routes to School initiatives to encourage students to safely walk and bike to/from school. Please print clearly.

19. Please provide any additional comments below.